U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 13050	2. Fiscal Year Covered From
	1 / 1 / 2004 Through: 12 / 31 / 2004
Name and address of person filing.	4. Name, file number, and address of labor organization.
Name _{Gregg} Martin	Name IBEW Local Union 569
	Labor Organization File Number 034 254
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 16714 Wikiup Road	Street 4545 Viewriage Avenue, #100
City Ramona	City San Diego
State California ZIP Code + 4 92065	State California ZIP Code + 4 92123-1633
5. Position in labor organization. Executive Board Member/VP	
	spouse or minor child directly or indirectly had any of the following interests xclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.				
6. Name and address of Employer (including	trade name, if any).	7.a. Nature of Interest, Transaction, or Income.		
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
		7.b. Amount.		
Street				
City				
State	ZIP Code + 4			

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information
submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the
undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)
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Signed ACO Signed	
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On 08/12/2005

(858) 569-8900

Date

Telephone Number

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name San Diego Electrical Pension Trust

Trade Name, if any:

P.O. Box, Bldg., Room No., if any PO Box 231219

Street

City San Diego

State California

ZIP Code + 4 92194 - 1219

9. Business deals with:

X a. Labor Organization

b. Trust

c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

Appointed by IBEW Local 569 as a labor Trustee.

12.a. Nature of interest held or income received.

11.b. Approximate dollar value of such dealing.

Expenses for required attendance at scheduled Board of Trustees meetings.

12.b. Amount.

14.a. Nature of payment.

\$3,035

\$0

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

 Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

13.b. Is the Business an Employer

or Consultant

14.b. Amount of payment

Name of Person Filing Gregg Martin File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with
Name San Diego Electrical Pension Trust	N/ a Labor Organization
Trade Name, if any:	a. Labor Organization
P.O. Box, Bldg., Room No., if any PO Box 23,219	b. Trust
Street	c. Employer
City San Diego	
State California ZIP Code + 4 92194-1219	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name	Appointed by IBEW Local 569 as a labor Trustee
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	
City	
State ZIP Code + 4	11.b. Approximate dollar value of such dealing. \$0
	12.a. Nature of interest held or income received.
	Expenses for required attendance at scheduled Board of Trustees meetings and educational conferences.
	12.b. Amount. \$5,069

Name of Person Filing $_{\mbox{Gregg}}$ Martin

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

Name and address of Business (including trade name, if any).	9. Business deals with
Name Sierra Investment Partners Trade Name, if any:	a. Labor Organization
P.O. Box, Bldg., Room No., if any	X b. Trust
Street 101 Ygnacio Valley Rd, #330	c. Employer
City Walnut Creek	
State California ZIP Code + 4 94596	
10. If 9.b. or 9.c. is checked give trust or employer's name	11.a. Nature of such dealing.
Name San Diego Electrical Pension Trust	Investment Manager.
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any PO Box 231219	
Street	
City San Diego	
State California ZIP Code - 4 92194-1219	11.b. Approximate dollar value of such dealing. \$756,641
	12.a. Nature of interest held or income received.
	Group dinner at an educational conference, a bottle of wine and golf supplies.
	12.b. Amount. \$208